

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF SOUTH CAROLINA

IN RE:

Frank Scott Dabney  
Kathryn Harrelle Dabney

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CASE NO: 13-04227 jw

CHAPTER: 13

STATEMENT OF CHANGE

DEBTOR.

In accordance with Bankruptcy Rule 1009 and Local Rule 1009-1, the undersigned hereby amends Schedule J as follows:

- 1) Amended Schedule J: To amended schedule to change reduce current monthly business expenses.

DATE 12/3/13

/s/ Heather S. Bailey

Signature of Attorney

Heather S. Bailey, Esq.

Moss & Associates Attorneys, P.A.  
2170 Ashley Phosphate Road, Suite 405  
North Charleston, South Carolina 29406  
(843) 744-3002

11592

District Court I.D. Number

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF SOUTH CAROLINA

IN RE:

Frank Scott Dabney  
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CHAPTER: 13

DEBTOR.

CERTIFICATE OF SERVICE

THE UNDERSIGNED HEREBY CERTIFIES THAT HE/SHE PROPERLY SERVED THE FOREGOING AMENDED SCHEDULE J TO ALL CREDITORS VIA REGULAR MAIL, POSTAGE PREPAID AS WELL AS THE CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE AS LISTED BELOW.

DATE 12/3/13

/s/ Roger K. Pruitt  
Moss and Associates Attorneys, P.A.  
2170 Ashley Phosphate Road, Suite 405  
North Charleston, South Carolina 29406

## DISTRICT OF SOUTH CAROLINA

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**AMENDED DECLARATION  
CONCERNING DEBTOR'S  
SCHEDULES**

/s/ Kathryn Harrelle Dabney  
Debtor

B6J (Official Form 6J) (12/07)

Frank Scott Dabney

In re Kathryn Harrelle Dabney

Case No. 13-04227

Debtor(s)

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) - AMENDED

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	2,229.63
a. Are real estate taxes included?	Yes	No <input checked="" type="checkbox"/>
b. Is property insurance included?	Yes	No <input checked="" type="checkbox"/>
2. Utilities:		
a. Electricity and heating fuel	\$	250.00
b. Water and sewer	\$	50.00
c. Telephone	\$	0.00
d. Other <u>See Detailed Expense Attachment</u>	\$	100.00
3. Home maintenance (repairs and upkeep)	\$	0.00
4. Food	\$	450.00
5. Clothing	\$	45.00
6. Laundry and dry cleaning	\$	35.00
7. Medical and dental expenses	\$	250.00
8. Transportation (not including car payments)	\$	230.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	125.00
b. Life	\$	28.10
c. Health	\$	0.00
d. Auto	\$	0.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) <u>See Detailed Expense Attachment</u>	\$	160.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	26,082.19
17. Other <u>DAUGHTERS TUITION TO BLESSED SACRAMENT SCHOOL</u>	\$	416.67
Other	\$	0.00

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ 30,451.59

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

DEBTORS DO NOT ANTICIPATE ANY CHANGES TO EXPENSES OF GREATER THAN 5% WITHIN THE NEXT YEAR. TRANSPORTATION EXPENSES ARE FOR WIFE TO DRIVE BACK AND FORTH TO WORK. MEDICAL EXPENSES INCREASED DUE TO DISCLOSURE OF SONS ILLNESS.

### 20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$	33,201.41
b. Average monthly expenses from Line 18 above	\$	30,451.59

B6J (Official Form 6J) (12/07)

c. Monthly net income (a. minus b.)

\$ 2,749.82

B6J (Official Form 6J) (12/07)

In re **Frank Scott Dabney**  
**Kathryn Harrelle Dabney**

Case No. **13-04227**

Debtor(s)

**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) - AMENDED**  
**Detailed Expense Attachment**

**Other Utility Expenditures:**

<b>CABLE</b>	\$	<b>60.00</b>
<b>INTERNET</b>	\$	<b>40.00</b>
<b>Total Other Utility Expenditures</b>	\$	<b>100.00</b>

**Specific Tax Expenditures:**

<b>AUTO PROPERTY TAXES</b>	\$	<b>60.00</b>
<b>REAL PROPERTY TAXES</b>	\$	<b>100.00</b>
<b>Total Tax Expenditures</b>	\$	<b>160.00</b>